

Information Disclosure Request

Minnesota Government Data Practices Act

A. Completed by Requester

Name (Last, First, MI)	Date of Request
Street Address	Phone Number
City, State, Zip	Email

Note: You do not have to provide any of the above contact information. However, if you want us to mail you copies of data, we will need some type of contact information. In addition, if we do not understand your request and need to get clarification from you, without contact information we will not be able to begin processing your request until you contact us.

Description of Information requested: (attach additional sheets if necessary)

I am requesting access to data in the following way:

Note: inspection is free but we charge for copies.

Inspection *Copies* *Both Inspection and copies*

